

A STUDY ON LITERACY AND HEALTH AWARENESS AMONG TRIBAL WOMEN IN ALLURI SITRAMARAJU DISTRICT OF ANDHRA PRADESH

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Abstract:

Indigenous population is routinely marginalized and deprived of their access to fundamental resources. Inferior health outcomes among indigenous communities can be partly attributed to inadequate access to health care facilities and medical services. Among the scheduled tribes or Adivasis of India, mortality, morbidity and Malnutrition rates remain particularly high when compared to the Indian population at large. These communities, officially recognized under the fifth schedule of the Indian constitution, comprise a significant 8.6% of the Indian population. Dispensation of literacy and health care services to this population, however, by the government and private sector alike, is disproportionately inadequate deficient. Remoteness of villages, uncooperative attitudes among medical personnel, limited manpower, and a lack of awareness within tribal communities. All posed difficulties in achieving adequate health care delivery. Literacy and Health care targeted to serve the needs of the Adivasi community is critical in maintaining an acceptable and adequate level of health care for all strata of Indian society.

Key Words: Literacy, Health Care, Health Awareness

INTRODUCTION

Literally the term 'development' implies empowers people in all factors of life and promotes important changes in their lives. However, development cannot take place by itself. It requires literacy, skilled and competent people. It is defined as the ability to influence the behaviour of others with or without restraint. Generally it is a socio-political process but particularly it is an individual item of self development. It also means taking control of one's own life. In present context literacy is seen as the most important element for growth and prosperity of a society, of a state and of a nation. Hence, the literacy which invests power in growth and prosperity is called educational empowerment. In other words when an individual or a body of individuals provided with such knowledge which enhances the ability for self development or all-round development needed to lead a meaningful, dignified and civilized way of life is called women empowerment.

Literacy becomes the most important factor for development as well as for empowering people irrespective of their caste, religion, community whatever it may be. Literacy provides people with knowledge and information which in turn bring about desirable changes in the way you think, feel and act. Literacy also builds in you a strong sense of self-esteem, self-confidence. It contributes very effectively to the realisation of people's potential. Therefore, literacy is considered as a social instrument for developing human resources and for human capital formation.

The relationship between literacy and development is not as simple as it appears to be. In fact, the impact of literacy on development depends basically on what we teach and how much the learners learn. Equally important is the interaction of literacy with other social and economic factors. Literacy is to be organised and oriented to have a lasting impact on income, agricultural productivity, fertility rate, birth spacing, pre- and postnatal health, nutrition, knowledge, attitudes and values.

It is known from various statistics that STs are the most deprived and marginalized in term of education the key to full-fledged development therefore they are in the last rung of the social ladder. The PTGs are at the lowest even among the tribals.

Literacy will be used as an agent of basic change in the status of women. In order to neutralize the accumulated distortion of the past, there will be a well-conceived edge in favour of women. The national system will play a positive, interventioning role in the empowerment of women. (The National Policy on Education, 1986)

REVIEW OF LITERATURE

Mishra (1996) in his study "Education of Tribal Children" attempted on the economic independence of women in the state of Orissa. The study tried the transformation societies to a modern economy. The traditional society was caste oriented. Women of peasant castes were agriculturists, potter women preferred pottery, fisher women engaged in fish vending, women from weaver community weaving and spinning and dalit women cleaning the roads. However in the process of industrialization many modern women displaced from their occupations. In conclusion, the study revealed that potential of women has been only marginally utilized in the state of Orissa even though the Government Camp up with certain Policies and incentives for women. So, the study revealed that education is an important avenue for upgrading the

economic and social conditions of the Scheduled Tribes. Education is in fact, an input not only for economic development of tribes but also for inner strength of the tribal communities which helps them in meeting the new challenges of life.

Literacy and educational attainment are powerful indicators of social and economic development among the backward groups in India. Currently, the tribes lag behind not only the general population but also the Scheduled Caste population in literacy and education. This disparity is even more marked among Scheduled Tribe women, who have the lowest literacy rates in the country (Maharatna, 2005). The male-female gap in literacy and educational attainment among the scheduled tribes is significant. Education, especially in its elementary form, is considered of utmost importance to the tribals because its crucial for total development of tribal communities and is particularly helpful to build confidence among the tribes to deal with outsiders on equal terms. Despite the sincere and concerted efforts by the government for the overall development of the scheduled tribes, they are still far behind in almost all the standard parameters of development. They are not able to participate in the process of development, as they are not aware of most of the programmes and policies made for their upliftment. This is mainly due to the high incidence of illiteracy and very low level of education among the tribal people. Hence, the educational status of the scheduled tribes and the role of governance in this direction are highly essential. It is well known that the educational background of tribes is very discouraging as compared to the rest of the population. So, education is an important avenue for upgrading the economic and social conditions of the Scheduled Tribes. In this context, the objective of this paper is to analyse the trend of literacy rate, gross enrolment ratio, dropout rates and Gender Parity Index of tribal education in India.

Johnston, Ved, Lyall, & Agarwal, (2003) made the finding that women who experienced abortion complications generally first sought care from un-trained or inadequately trained providers in their village. But when their medical condition worsened, some of the women sought the services of providers who were more qualified but less affordable or less conveniently located. The study highlights how medical cost and distance effect the nature of seeking women's health care/ information needs. The study emphasises the need to strengthen links between rural, village-based providers and the formal health care system, to help women avoid unsafe abortion by using contraceptives and accessing safe abortion care and receive appropriate and timely treatment for complications.

Patrick and Ferdinand (2016) found that unavailability of library resources is the major barrier to the access of information by respondents with 98%, illiteracy with 76% of respondents, language barriers with 66% respondents, lack of time with 58% of respondents and high cost of electronic gadgets with 33% of respondents. Apart from the above mentioned above, poverty is also found to be another barrier for accessing proper health care by the rural women of Lagos, Nigeria (George, 2018). Gate-Keeping is viewed as a barrier on rural women's prompt seeking of modern health treatment for themselves and their children in some villages of Upper East Region of Ghana, where a total of 2,856 women were interviewed. Only 14.5% said they do not require authorisation from any man in their compound before attending a hospital, while 38.2% and 38.3% need authorisation from their husbands and compound heads respectively. Compound gate-keeping systems thus characterize the nature of these constraints (Ngom, Debpuur, Akweongo, Adongo, & Binka,

2003). Similarly, Barua, & Kurtz, (2001) found that women have almost no role in deciding whether they could seek treatment for gynaecological symptoms.

Vaidyanathan and Nair (2001) suggested in their study “Challenging issues of tribal education in India” that there must be implementation of ‘education for all’ in tribal areas to overcome many challenging issues of tribal education in India. This study analyses number of barriers in education of tribal community. Especially the women are far away from the education due to lack of facilities and civilization.

The Praitichi Committee Report (2002) “Challenging issues of tribal education in India” identified cost of schooling, lack of motivation of teachers, lack of inspection, and the increasing dependence on private tutoring to be the main hurdles in the path of education for tribal children. In the report, it is noticed that most of the tribal villages far away from the civilization. Most of the teachers who are coming from nearby towns or villages to their duties are irregular. There is no proper inspection on the functioning of those schools. Because of these drawbacks the interested parents in these areas sending their children to schools located in nearby town/city, which is costly affair to them. Due to these problems the education and literacy in the tribal areas far away from the average figures of national statistics. The committee recommend that for the education development of tribal children, the literacy of tribal women is more important, therefore the government must introduce some programmes which can make tribal women literacy.

NEED AND SIGNIFICANCE OF THE STUDY

Most of the tribal’s are still devoid of modern facilities like literacy, electricity, proper drinking water, health care, ample transportation, etc. Tribal development in India has been a success as the primitive societies living in remote rural areas are now educating their children and living in desirable standards. Apart from several governmental efforts, the contributions of Non-Governmental Organizations (NGOs) in providing training and development in different sectors of economy especially the tribal population. Women are showing a propensity to join in Self-Help Groups and homestead farming activities to improve their capacity building in all socio-economic activities. Literacy improves output, quality, diversity and occupational safety and improves health, thereby increasing incomes and livelihoods of the poor. It also helps to develop social awareness and improve knowledge about informal sector associations, rural organizations and governance. The fact is despite being unskilled, poor, suppressed or discriminated tribal women still try to contribute to family income either directly or indirectly.

Although there is a significant increase in the literacy of population of all categories in India, the tribal women are far behind from the national increase, both in terms of national average and women literacy. Despite the opportunities, special initiatives and care by the government for tribal education, the achievement of tribal women education is not as per expectations due to several factors. The tribal women literacy, being a distinct discipline with different socio-cultural fabrics and hardships, needs to be analyzed distinctively to find out the hard realities the tribal women face in their development.

There is no doubt that the tribal women can acquire any development through literacy and thus can change their own destiny. Their self perception can be elevated by the knowledge that they are contributing financially and visibly to the household. They can avoid

dependence on others and escape exploitation in everyday life, avoid humiliation, gain confidence to work more productively.

OBJECTIVES OF THE STUDY

1. To study the demographic profile of the tribal women in the East Godavari District.
2. To study the family details of the tribal women in the study area.
3. To study the attitude of tribal women towards women's place in the present society.
4. To study the relation between literacy and development of Tribal women.
5. To study the relation between health and development of Tribal women.

2.

HYPOTHESES OF THE STUDY

1. There is no significant difference between literate and illiterate tribal women on social factors.
2. There is no significant difference in health and hygiene conditions of literate and illiterate tribal women.

RESEARCH METHODOLOGY

The main objective of the present investigation is to study the health and literacy levels and development of tribal women of East Godavari district in Andhra Pradesh state.

Table - 1: Mean, SD, and 't' Values on the perceptions of women on social factors and health and hygiene conditions of literate and illiterate tribal women

Area	Health and Literacy Levels	N	Mean	Std. Dev.	t-value	p-value
Literacy	Yes	174	20.92	14.35	2.43*	0.02
	No	239	17.42	14.55		
Illiteracy	Yes	174	31.63	20.99	1.98*	0.05
	No	239	28.66	20.36		
Social Development	Yes	174	20.20	13.76	1.99*	0.05
	No	239	17.70	12.50		
Hygiene Conditions	Yes	174	10.52	7.21	0.24 ^{NS}	0.81
	No	239	10.35	7.14		
Resources	Yes	174	14.29	11.99	0.87 ^{NS}	0.38
	No	239	13.29	11.10		
Personal and Health Related Issues	Yes	174	21.13	17.28	2.01*	0.03
	No	239	18.54	15.89		
Relationship	Yes	174	8.09	6.82	0.75 ^{NS}	0.45

	No	239	7.57	6.96		
Overall perceptions	Yes	174	67.78	65.00	0.14 ^{NS}	0.89
	No	239	66.82	68.59		
Status of Women	Yes	174	61.66	17.24	0.15 ^{NS}	0.88
	No	239	61.91	16.17		

*Significant at 0.05 level and NS: Not Significant

EDUCATIONAL IMPLICATIONS

Literacy has played a major role in empowering tribal women. By empowering tribal woman through literacy can thus enable them to live with dignity and self reliance cutting across the barriers that prevent them from taking actions to improve their state both at the individual and collective level. Therefore, health and literacy development programmes must be launched for tribal women so as to make them self reliant and economically independent.

CONCLUSION

The main aim of literacy is to change the cultural norms and patterns of life of tribal women to make them economically independent, to organize themselves to form strong groups so as to analyze their situations and conditions of living, understand their rights and responsibilities and to enable them to participate and contribute to the development of women and the entire society.

Tribal women in India had specific problems, some of these were built-in problems of these tribal communities and some were imposed upon them which jeopardized their overall development and progress inclusive of their health. Therefore, in order to improve the health status of the tribal women, the health care delivery should be designed for each specific tribal group in such a way to cater to their specific needs and problems by ensuring their personal involvement.

Primary healthcare has been proven to be a highly effective and efficient way to address the main causes and risks of poor health and well-being today, as well as handling the emerging challenges that threaten health and well-being tomorrow. There is evidence that quality primary healthcare reduces total healthcare costs and improves efficiency by reducing hospital admissions: A good value investment.

The percentage of health and literacy in Schedule Tribe women has been gradually increasing. The fact remains that a large number of tribal women in rural areas might have missed opportunities at different stages. In order to empower them varieties of literacy and training programmes have to be designed and organized. The skill could be for assuming political leadership or for economic self-reliance or even social transformation.

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